|  | PATENT A  |   | と                | 9/73<br>15 0 1                | 27,          | 633<br>4-07      |       |           |       |                        |        |                     |                        |
|--|---|---|------------------|-------------------------------|--------------|------------------|-------|-----------|-------|------------------------|--------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |                  |                               |              |                  |       |           | EN    | TITY                   | .OR    | OTHER<br>SMALL      | THAN                   |
| TOTAL CLAIMS   |   |   | 8                |                               |              |                  | I     | RATI      | E     | FEE                    | 1      | RATE                | FEE                    |
| FOR  |   |   | NUMBER FILED     |                               | NUMBER EXTRA |                  |       | BASIC I   | FEE   | 355.00                 | OR     | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 8 minus 20=      |                               | . 0          |                  |       | X\$ 9     | =     |                        | OR     | X\$18=              |                        |
| INDEPENDENT CLAIMS   |   |   | # minus 3 =      |                               | ' /          |                  |       | X40=      |       |                        | OR     | X80=                | 02                     |
| MU   | LTIPLE DEPEN  | IDENT CLAIM PI                            | RESENT           |                               |              |                  |       | 405       |       |                        |        |                     | 80                     |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |   |   |                  |                               |              |                  |       | +135      | _     |                        | OR     | +270=               | 165                    |
| CLAIMS AS AMENDED - PART II  |   |   |                  |                               |              |                  |       | TOTA      | L     |                        | OR     | TC/TAL              | 790                    |
| (Column 1) (Column 2) (Column 3)   |   |   |                  |                               |              |                  | 1     | SMAL      | L E   | NTITY                  | OR     | OTHER<br>SMALL I    |                        |
| ENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVIO<br>PAID | EER<br>OUSLY | PRESENT<br>EXTRA |       | RATE      |       | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON  | Total   | . 1                                       | Minus            | 0                             | 20           | =                |       | X\$ 9     | =     |                        | OR     | X\$18=              |                        |
| AMENDMENT  | Independent   | . 2                                       | Minus            | •••                           | 3            | =                | Ì     | X40=      | _     |                        | OR     | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |                  |                               |              |                  |       | +135:     |       |                        |        | .070                |                        |
|  |   |   |                  |                               |              |                  |       |           | AL    |                        | OR     | +270=               |                        |
|  | (Column 1) (Column 2) (Column 3)  |   |                  |                               |              |                  |       |           |       |                        | OR     | ADDIT. FEE          |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |       | RATE      |       | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •   | Minus,           | **                            | <u>.</u>     | =                |       | X\$ 9=    | =     |                        | OR     | X\$18=              |                        |
|  | Independent   | <u> </u>                                  | Minus            | ***                           |              | =                |       | X40=      |       |                        | OR     | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDEN   |   |                  |                               | T CLAIM      |                  |       | +135=     | _     |                        | OR     | +270=               |                        |
|  | ·   |   |                  |                               |              |                  |       |           | AL EE |                        |        | TOTAL               |                        |
|  | (Column 1) (Column 2) (Column 3)  |   |                  |                               |              |                  |       |           |       |                        | 90     | ADDIT. FEE          |                        |
| AMENDMENT C  |   | CLAIMS - REMAINING                        | ******           | HIGH                          | EST          | PRESENT          |       |           |       | ADDI-                  |        |                     | ADDI-                  |
|  | ***   | AFTER AMENDMENT                           |                  | PREVIO<br>PAID                | OUSLY        | EXTRA            |       | RATE      |       | TIONAL<br>FEE          |        | RATE                | TIONAL                 |
|  | Total   | •   | Minus            | ••                            |              | =                |       | X\$ 9=    | ╗     | 166                    | 00     | X\$18=              | FEE                    |
|  | Independent   | •   | Minus            | ***                           |              | =                | ŀ     |           | ╢     |                        | OR     |                     |                        |
| <b>(</b>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |                  |                               |              |                  |       | X40=      | -     |                        | OR     | X80=                |                        |
| ١.,  | If the entry in column 1 is tess than the entry in column 2, write "0" in column 3. |   |                  |                               |              |                  |       | =         |       | OR                     | +270=  |                     |                        |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE |   |   |                  |                               |              |                  |       |           |       |                        | OR     | TOTAL<br>ADD:T. FEE |                        |
|  | The "Highest Nuπ  | nber Previously Pai                       | id For (Total or | Independ                      | ent) is the  | highest numbe    | r tou | nd in the | арр   | ropriate box           | in col | umn 1.              |                        |

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